PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

| CLAIMS AS FILED - PART I | | | | | | | SMALL ENTITY TYPE | | OTHER THAN OR SMALL ENTITY | | |
|--------------------------------------------------------------------------|------------------------------------------------|-------------------------------------------|------------------------------------------|-----------------|---------------------------------------|-------------------------------------------|-------------------|------------------------|----------------------------|---------------------|------------------------|
| | | | (Colur | nn 1) | ((| Column 2) | | | | SWALL | |
| U.S. NATIONAL STAGE FEES | | | | | | | RATE | FEE | | RATE | FEE |
| BASIC FEE | | | SMALL EN | T. = \$ 150 | LARG | E ENT. = \$ 300 | BASIC FEE | | OR | BASIC FEE | 300 |
| EXAMINATION FEE | | | Satisfies PCT (4) = \$5 | | I | ner situations = 100 / \$ 200 | EXAM. FEE | , | | EXAM. FEE | 200 |
| SEARCH FEE | | | U.S. is ISA = ALL other c \$ 200 / | ountries = | | her situations = 250 / \$ 500 | SEARCH FEE | | | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS. | | | 13 minus 100 = | | | / 50 = | X \$ 125 = | | | X \$ 250 = | |
| TOT | AL CHARGEAE | BLE CLAIMS | 4 " | ninus 20 = | * | | X \$ 25 = | | OR | X \$ 50 = | |
| INDE | PENDENT CL | AIMS | 2 | minus 3 = | * | | X \$ 100 = | | OR | X \$ 200 = | |
| MUL | TIPLE DEPENI | DENT CLAIM PR | ESENT | | | | + \$ 180 = | | OR | + \$ 360 = | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | lumn 2 | TOTAL | | OR | TOTAL | 900 |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | OTHER THAN SMALL ENTITY OR SMALL ENTIT | | | | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | NUM PREVI | HEST IBER OUSLY FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus · | *** | | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | · · · · · · · · · · · · · · · · · · · | | TOTAL ADDIT. | | OR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | (Colu | mn 2) | (Column 3) | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | NUM PREVI | HEST MBER OUSLY FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | | | | | | |
| * | If the entry in call | ump 1 is loss than th | anto in colum | nn 2. write "O" | 'in colum | . 3 | | | | | |

the entry in column 1 is less than the entry in column 2, write 0 in column 3

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.